
Accreditation Report – Wellspring Inc., dba Wellfully

Date of Review: April 17, 2023

REVIEW PROCESS:

Wellspring Inc., dba Wellfully (Wellfully) was reviewed by The Department of Social Services, Office of Licensing and Accreditation for adherence to the Administrative Rules of South Dakota (ARSD) in regard to Substance Use Disorders on April 17, 2023. This report contains the following:

- Agency Summary
- Interview Results
- Stakeholder Results
- Areas Requiring a Plan of Correction
- Prior Areas Addressed in Previous Review
- Accreditation Results

The accreditation results are derived from an administrative score which includes the scoring of policies and procedures and personnel files, the client case record scores, and an overall cumulative score. The level of accreditation status is based on the overall cumulative score.

AGENCY SUMMARY:

Wellspring Inc., dba Wellfully (Wellfully) is a Substance Use Disorder agency located in Rapid City, S.D. The agency is seeking to renew accreditation for outpatient substance use disorder (SUD) services.

Burke Eilers is the current executive director. Wellfully's mission is to "provide health, recovery and development services to all adolescent youth". Not only do they provide outpatient substance use disorder services, but they are also a psychiatric residential treatment facility for adolescents, for which they are accredited by Joint Commission. Additionally, Wellfully reports that 92% of their clients are eligible for Medicaid, 78% of their clients have been involved with the Department of Corrections, and 74% of their clients have been deemed abused or neglected by Child Protection Services.

Wellfully currently employs two outpatient clinicians. One clinician completes assessments, while the other completes treatment plans and leads intensive outpatient groups. Wellfully also provides residential services for youth in the form of group care and residential treatment.

INTERVIEW RESULTS:

Description: The Department of Social Services, Office of Licensing and Accreditation completes confidential interviews with consenting clients and staff of the agency as part of the accreditation process. The interviews are not a scored component of the accreditation review. However, the information obtained in the interviews is used for quality improvement of the agency.

An interview was completed with one addiction counselor trainee. The employee shared he has worked at Wellfully for approximately seven weeks. He stated that all the counselors, including the inpatient counselors, often share ideas with each other and give each other feedback. He feels like those who work for Wellfully are there because they truly care. The staff member stated that he tries to take a “whole person” approach to treatment.

An interview was completed with one client. The client recently graduated from intensive outpatient treatment. She stated that she liked outpatient treatment at Wellfully, because she was really able to decide if she wanted to participate or not. Wellfully helped her to realize that she was not going to be able to make changes if she did not want to make changes, and she wasn't going to be able to fake her way through treatment. The client discussed the support from staff she has received at Wellfully, and spoke positively about the facility as a whole.

STAKEHOLDER SURVEY:

Description: Stakeholder Survey data is collected once a year for all accredited mental health and substance use disorder agencies. As part of the survey process, accredited agencies are asked to share the survey with at least three stakeholders in their community. In addition, feedback is gathered from the Department of Corrections (DOC), Unified Judicial System (UJS), and Child Protection Services (CPS) regarding the accredited agencies. The surveys are not a scored component of the accreditation review however the information obtained in the survey results is used for quality improvement of the agency.

The Department of Social Services, Division of Behavioral Health sends out annual stakeholder surveys. Wellfully received a total of 4 stakeholder survey results for 2022. All stakeholders either agreed or strongly agreed that Wellfully provides quality services, are supportive of client needs, and work to make sure their clients receive positive outcomes.

AREAS REQUIRED FOR PLANS OF CORRECTION:

Description: The following areas will require a plan of correction to address the rules of non-compliance which shall include an updated policy and/or procedure, a time frame for implementation of this procedure, the staff position or title responsible for implementation and the staff position or title responsible for ensuring continued compliance of these rules.

1. According to ARSD 67:61:07:06, An addiction counselor or counselor trainee shall develop an individualized treatment plan based upon the integrated assessment for each client admitted to an outpatient treatment program, intensive outpatient treatment program, day treatment program, clinically-managed low-intensity residential treatment program, or medically-monitored intensive inpatient treatment program. Evidence of the client's meaningful involvement in formulating the plan shall be documented in the file. The treatment plan shall be recorded in the client's case record and includes:
 1. A statement of specific client problems, such as co-occurring disorders, to be addressed during treatment with supporting evidence;
 2. A diagnostic statement and a statement of short term and long term treatment goals that relate to the problems identified;
 3. Measurable objectives or methods leading to the completion of short term goals including:
 - a. Time frames for the anticipated dates of achievement or completion of each objective or reviewing progress towards objectives;
 - b. Specification and description of the indicators to be used to assess progress;
 - c. Referrals for needed services that are not provided directly by the agency; and
 - d. Include interventions that match the client's readiness for change for identified issues;
 4. A statement identifying the staff member responsible for facilitating the methods or treatment procedures.

The individualized treatment plan shall be developed within ten calendar days of the client's admission for an intensive outpatient treatment

program, day treatment program, clinically-managed low-intensity residential treatment program, or medically monitored intensive inpatient treatment program.

The individualized treatment plan shall be developed within 30 calendar days of the client's admission for a counseling services program. All treatment plans shall be reviewed, signed and dated by the addiction counselor or counselor trainee. The signature must be followed by the counselor's credentials.

None of the outpatient treatment plans reviewed were completed by an addiction counselor or counselor trainee. Instead, they were in the format of questionnaires given to the clients to complete. Additionally, the treatment plan document did not include item 3 of the above requirements. They were also not signed and dated by the counselor. The treatment plan should be based on information received during the assessment, as well as conversations with the client.

2. According to ARSD 67:61:07:07 the program shall document each client the progress and reasons for retaining the client at the present level of care; and an individualized plan of action to address the reasons for retaining the individual in the present level of care. This document is maintained in the client case record. It is appropriate to retain the client at the present level of care if:
 1. The client is making progress but has not yet achieved the goals articulated in the individualized treatment plan. Continued treatment at the present level of care is assessed as necessary to permit the client to continue to work toward his or her treatment goals; or
 2. The client is not yet making progress, but has the capacity to resolve his or her problems. He or she is actively working toward goals articulated in the individualized treatment plan. Continued treatment at the present level of care is assessed as necessary to permit the client to continue to work toward his or her treatment plan goals; or
 3. New problems have been identified that are appropriately treated at the present level of care. The new problem or priority requires services, the frequency and intensity of which can only safely be delivered by continued stay in the current level of
 - 4.

care. The level of care in which the client is receiving treatment is therefore, the least intensive level at which the client's new problems can be addressed effectively.

The individualized plan of action to address the reasons for retaining the individual in the present level of care shall be documented every 14 calendar days for intensive outpatient services.

Continued service criteria were not being completed for any client in the intensive outpatient treatment program.

3. According to ARSD 67:61:07:12, a designated staff member shall conduct a tuberculin screening for the absence or presence of symptoms with each client newly admitted to outpatient treatment, intensive outpatient, day treatment, clinically-managed low intensity residential treatment, clinically managed detoxification, and intensive inpatient treatment within 24 hours of admission to determine if the client has had any of the following symptoms within the previous three months:
 1. Productive cough for a two to three week duration;
 2. Unexplained night sweats;
 3. Unexplained fevers; or
 4. Unexplained weight loss.

Any client determined to have one or more of the above symptoms within the last three months shall be immediately referred to a licensed physician for a medical evaluation to determine the absence or presence of active disease. A Mantoux skin test may or may not be done during this evaluation based on the opinion of the evaluating physician. Any client confirmed or suspected to have infectious tuberculosis shall be excluded from services until the client is determined to no longer be infectious by the physician. Any client in which infectious tuberculosis is ruled out shall provide a written statement from the evaluating physician before being allowed entry for services.

Three out of six reviewed client files did not have evidence of a tuberculin screening.

PRIOR AREAS REQUIRING A PLAN OF CORRECTION:

Description: Wellspring Inc., dba Wellfully was last reviewed by the Department of Social Services, Office of Licensing and Accreditation on March 11-12, 2021. The 2021 review identified seven areas requiring a plan of correction, six of which were resolved, and one of which remains a plan of correction in 2023.

ACCREDITATION RESULTS:

	Three Year Accreditation (90%-100%)
X	Two Year Accreditation (70%-89%)
	Probation (69% and below)